

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
01-601



In re Application of **NAKAYA**

Application Number **10/775,183**

Filed: **2/11/2004**

For: **INDIVIDUAL INFORMATION MANAGEMENT SYSTEM**

Group Art Unit
3661

Examiner **Broadhead**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | |
|-------------------------------------|---|--------------------|
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ <u>120.00</u> |
| <input checked="" type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ <u>450.00</u> |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ <u>1020.00</u> |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ <u>1,590.00</u> |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ <u>2160.00</u> |
| <input type="checkbox"/> | Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____. | |

A small entity statement under 37 CFR 1.27:

- ☐ is enclosed.
- ☐ has already been filed in this application.
- ☒ A check in the amount of the fee is enclosed.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account
- Number 50-1147. I have enclosed a duplicate copy of this sheet.

I am the ☐ assignee of record of the entire interest.

- ☐ applicant.
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). _____

Date 2 March 2006


Signature

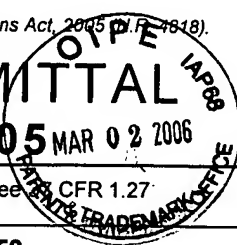
Cynthia K. Nicholson(Reg. No.36,880)

Typed or printed name

Fees pursuant to the Consolidated Appropriations Act, 2005 (P.L. 109-171)

FEE TRANSMITTAL

For FY 2005



Application Number	10/775,183
Filing Date	2/11/2004
First Named Inventor	NAKAYA
Examiner Name	Broadhead
Art Unit	3661
Attorney Docket No.	01-601

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**450**

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: **50-1147** Deposit Account Name: **Posz Law Group, PLC**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

- 20 or HP =

x

=

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP =

x

=

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 =

/ 50 =

(round up to a whole number) x

=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Petition for Extension of Time (2 months)

Fees Paid(\$)

450

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 36,880	Telephone (703) 707-9110
Name (Print/Type)	Cynthia K. Nicholson	Date	2 March 2006